BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

		Effectiv	e Decemb	oer 29, 1999							
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL I	ENTITY	OR	OTHER SMALL	
FOR		NUMBE	R FILED	NUMBER	NUMBER EXTRA		RATE	FEE	1 [RATE	FEE
ВА	SIC FEE	19 × 1						345.00	OR	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	690.00
то	TAL CLAIMS	18	, minus :	20= *			X\$ 9=		OR	X\$18=	
IND	EPENDENT CL	AIMS 3	3 minus 3 =		*		X39=		OR	X78≃	
MU	ILTIPLE DEPEN	IDENT CLAIM PI	RESENT			 	+130=		OR	+260=	
* If	the difference	in column 1 is	less than ze	ro, epper "0" im	column 2	Ĺ	TOFAL		OR OR	TOTAL	1090-
	С	LAIMS AS A (Column 1)	MENDED) - PART II (Column 2)	(Column 3)	1/5	SMALL I	ENTITY	OR OR	OTHER SMALL	THAN
ENT A	A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	. 18	Minus	9 0	=		X\$ 9=		OR	X\$18=	
AME	Independent	· 3	Minus	PENDENT CLAIM	=		X39=		OR	X78=	
	FINST PRESE	NIATION OF MI	JUIPLE DE	PENDENT CLAIM			+130=		OR	+260=	
						L	TOTAL DDIT. FEE			TOTAL ADDIT. FEE	
		(Column 1)		(Column 2)	(Column 3)		DDH. FEE		• '	ADDIT. FEET	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**	=		X\$ 9=	A 2	OR	X\$18=	
AME	Independent	*	Minus	PENDENT CLAIN	=		X39=		OR	X78=	
	TINOT PRESE	INTATION OF IM	OLTIPLE DE	PENDENT CLAIR		1	+130=		OR	+260=	
						A	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
	ESSENCE CONTRACTOR NOTE	(Column 1)	Travilla is different a second	(Column 2)	(Column 3)						
ENT C		CLAIMS REMAINING AFTER AMENDMEN'T		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**	=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	=	 	X39=		OR	X78=	
_	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDENT CLAIN	1	J ├			•		
• 1	If the entry in colu	mn 1 is less than t	he entry in colu	umn 2, write "0" in c	olumn 3.	L	+130= TOTAL		OR	+260=	
**	If the "Highest Nu If the "Highest Nu	mber Previously Pa Imber Previously P	aid For" IN THI aid For" IN TH	S SPACE is less th IS SPACE is less the Independent) is the	an 20, enter "20 an 3, enter "3."	^1	DDIT. FEE	propriate bo	_	TOTAL ADDIT. FEE lumn 1.	

This Form is for INTERNAL PTO USE ONLY It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 09, 483062

Total Fee Calculation

	Fee Code	Total # Claims	Number Extra	<u> </u>	Fee	Fee	-	Total
	Sm./Lg.				Sm. Entity	Lg. Entity		
Basic Filing Fee	201/101					690-	7	690,-
Total Claims >20	203/103	18 -20 -		х			-	
Independent Claims >3	202/102	3 1-		X			3	
Mult. Dep Claim Present	204/104	``,					2	
Surcharge	205/105	•				130-	,	130-
English Translation	139					1.70.		
TOTAL FEE CALCULA	TION							820.
Fees due upon filing ti	ne application:							
Total Filing Fees Due	= \$	65	0.					
Less Filing Fees Subm	iπed - \$							
BALANCE DUE	= \$	8	20.	-				
G019a								
Office of Initial/Patent	Examination							
		\						